

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>8/25/05</u>		2 Serial/Patent # <u>10/523233</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$ 200.00							
		8 TO BE REFUNDED BY:									
10 REASON:		Treasury Check									
<input checked="" type="checkbox"/>	Overpayment	<input checked="" type="checkbox"/>	Credit Deposit A/c #:								
	Duplicate Payment		9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"> <tr> <td>5</td><td>0</td><td>--</td><td>3</td><td>2</td><td>8</td><td>9</td> </tr> </table>		5	0	--	3	2	8	9
5	0	--	3	2	8	9					
No Fee Due (Explanation):											
<i>Fee Code Corrective</i>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>B.A.C.</u>		TITLE: _____									
SIGNATURE: <u>BAC</u>		PHONE: _____									
OFFICE: <u>PCT/DO/EO</u>		Ref: 08/26/2005 BCAMPBEL 0015042700									
<div style="display: flex; justify-content: space-between;"> <span>***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****</span> <span>FC: 9204</span> </div>											
APPROVED: _____		DATE: _____									

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*